

## GENERAL FACT SHEET

BILL NUMBER 11-133

BRIEF TITLE	APPROVAL DEADLINE	REASON
Amend LMC 4.62.010, Police and Fire Pension Plan Investment Board, to provide staggered terms		Provide the opportunity for better continuity by staggering the terms of members elected by the Police and Fire departments.

## DETAILS

## POSITIONS/RECOMMENDATIONS

<p>An ordinance amending Lincoln Municipal Code Chapter 4.62 by amending:</p> <p>Amend Lincoln Municipal Code Sections 4.62.010 titled Police and Fire Pension Plan Investment Board to provide staggered terms for members elected by the Police and Fire departments</p>	<b>Sponsor:</b> Personnel Dept.	<b>Recommend approval:</b> Yes.
	<b>Program Departments, or Groups Affected:</b> Police and Fire Pension Investment Board Members	
	<b>Applicants/ Proponents:</b> Personnel Dept. and Police and Fire Pension Investment Board Members	
<b>Discussion (Including Relationship to other Council Actions)</b>	<b>Opponents</b>	<b>Groups or Individuals</b>
		<b>Basis of Opposition</b>
	<b>Staff Recommendations</b>	<input type="checkbox"/> For <input type="checkbox"/> Against Reason Against
	<b>Board or Commission Recommendation</b>	<b>BY:</b> <input type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No Action Taken <input type="checkbox"/> For with revisions or conditions (See Details column for conditions)
	<b>CITY COUNCIL ACTIONS</b> (For Council Use Only)	<input type="checkbox"/> Pass <input type="checkbox"/> Pass (As Amended) <input type="checkbox"/> Council Sub. <input type="checkbox"/> Without Recommendation <input type="checkbox"/> Hold <input type="checkbox"/> Do not Pass

**DETAILS**
**POLICY/PROGRAM IMPACT**

	POLICY OR PROGRAM CHANGE	<input type="checkbox"/> NO <input type="checkbox"/> YES	
	OPERATIONAL IMPACT ASSESSMENT	_____	
	FINANCES		
	COST AND REVENUE PROJECTIONS	COST of total project:	\$
		COST of this Ordinance/ Resolution	\$0.00
		RELATED annual operating Costs	\$
		INCREASE REVENUE EXPECTED/YEAR	\$
SOURCE OF FUNDS	CITY [Approximately]		
	_____	\$ _____ %	
	_____	\$ _____ %	
	_____	\$ _____ %	
	NON CITY [Approximately]		
	_____	\$ _____ %	
		_____	\$ _____ %
BENEFIT COST			
<input type="checkbox"/> Front Foot Assessment			
<input type="checkbox"/> Square Foot			
Average			
\$ _____ \$			

**APPLICABLE DATES:**
**FACT SHEET PREPARED BY:** Paul D. Lutomski

**REVIEW BY:** John E. Cripe

**REFERENCE NUMBER**